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Substitute PTO/SB/21 (08-03)  
Approved for use through 08/30/2003. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)  (with 15 attachments)	Application Number	10/630,112	
	Filing Date	July 30, 2003	
	First Named Inventor	Xiang Li	
	Art Unit		
	Examiner Name		
Total Number of Pages In This Submission	4	Attorney Docket Number	O1056/20009

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Assignment and Cover Sheet	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - Form 1449 with 15 attachments; and - Return Receipt Postcard
Remarks  The Office is authorized to charge or credit our Account No. 03-0075 as necessary to effect entry and/or ensure consideration of this submission.		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Caesar, Rivise, Bernstein, Cohen & Pokotilow, Ltd. (Customer No. 03000)	
Signature	Michael J. Cornelison, Registration No. 40,395	
Date	10/29/2003	

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Typed or printed name	Michael J. Cornelison	
Signature		Date 10/29/2003

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(Substitute) PTO/SB/21 (09-04)

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**TRANSMITTAL  
FORM**

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Total Number of Pages in This Submission

15

Application Number

11/630,112

Filing Date

July 30, 2003

First Named Inventor

Xiang Li

Art Unit

1742

Examiner Name

William T. Leader

Attorney Docket Number

O1056/20009

**ENCLOSURES**

(Check all that apply)



Fee Transmittal Form



Fee Attached



Amendment/Reply



After Final



Affidavits/declaration(s)



Extension of Time Request



Express Abandonment Request



Information Disclosure Statement



Certified Copy of Priority Document(s)

Reply to Missing Parts/  
Incomplete ApplicationReply to Missing Parts  
under 37 CFR 1.52 or 1.53

Drawing(s)



Licensing-related Papers



Petition

Petition to Convert to a  
Provisional Application

Power of Attorney, Revocation



Change of Correspondence Address



Terminal Disclaimer



Request for Refund



CD, Number of CD(s) \_\_\_\_\_



Landscape Table on CD



After Allowance Communication to TC

Appeal Communication to Board  
of Appeals and InterferencesAppeal Communication to TC  
(Appeal Notice, Brief, Reply Brief)

Proprietary Information



Status Letter

Other Enclosure(s) (please identify  
below):

See remarks below

**Remarks**Examiner's Interview Summary and Request for Signed Information  
Disclosure Statement; copy of previously filed Supplemental Application Data  
Sheet; copy of previously filed Information Disclosure StatementPlease charge Attorney Account No. 03-0075 as necessary to effect entry and/or  
ensure consideration of this submission.**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name

Caesar, Rivise, Bernstein, Cohen &amp; Pokotilow, Ltd., Customer No. 03000

Signature



Printed name

Michael J. Cornelison

Date

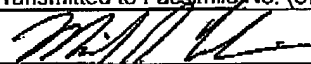
October 20, 2005

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Typed or printed name

Michael J. Cornelison

Date

October 20, 2005

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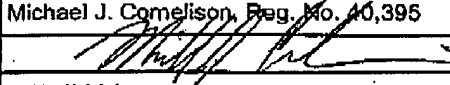
SUBSTITUTE PTO/SB/21 (02-04)

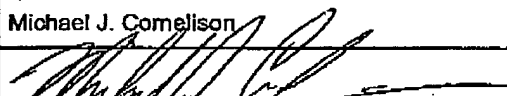
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/630,112	
	Filing Date	July 30, 2003	
	First Named Inventor	Xiang LI	
	Art Unit	1741	
	Examiner Name		
Total Number of Pages in This Submission	14	Attorney Docket Number	O1058/20009

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form (In duplicate) <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Assignment and Cover Sheet	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): (See Remarks section below)
Remarks - Submission of Supplemental Application Data Sheet; - Request for a Second Updated Filing Receipt; and - Return Receipt Postcard.		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Caesar, Rivise, Bernstein, Cohen & Pokotilow, Ltd. (Cust. No. 03000)	
Signature		
Date	03/19/2004	

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Typed or printed name	Michael J. Cornelison	
Signature		Date 03/19/2004

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